

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request:	2 Serial/Patent # <u>10/522884</u>			
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
<input checked="" type="checkbox"/> Filing			\$ 50	
<input type="checkbox"/> Amendment			\$	
<input type="checkbox"/> Extension of Time			\$	
<input type="checkbox"/> Notice of Appeal/Appeal			\$	
<input type="checkbox"/> Petition			\$	
<input type="checkbox"/> Issue			\$	
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$	
<input type="checkbox"/> Maintenance			\$	
<input type="checkbox"/> Assignment			\$	
<input type="checkbox"/> Other			\$	
			7 TOTAL AMOUNT OF REFUND	\$ 50
			8 TO BE REFUNDED BY:	
			Treasury Check	
			Credit Deposit A/C #:	
			9	--
10 REASON:				
<input checked="" type="checkbox"/> Overpayment				
<input type="checkbox"/> Duplicate Payment				
No Fee Due (Explanation):				
<u>Refunded to Credit card</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME:		<u>Darrell Cottman</u>		TITLE: <u>Paralegal</u>
SIGNATURE:		<u>Darrell Cottman</u>		PHONE: <u>703-304-9404</u> 203
OFFICE: *****				
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED:		DATE:		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B